

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 27

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE-PRESIDENT

1. NAME OF COMMITTEE (in full) RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC		2. IDENTIFICATION NUMBER C00430512
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported C/O JOHN GROSS 11 TIMES SQUARE		
CITY, STATE, and ZIP CODE NEW YORK NY 10036-8299		3. IS THIS REPORT FOR : <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General

4. TYPE OF REPORT (Check here ☐ if this is a Termination Report.)

☒ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

Monthly Report Due On:

☐ February 20

☐ March 20

☐ April 20

☐ May 20

☐ June 20

☐ July 20

☐ August 20

☐ September 20

☐ October 20

☐ November 20

☐ December 20

☐ January 31

☐ Twelfth day report preceding

Primary

(Type of Election)

election on _____ in the State of _____

☐ Thirtieth day report following the General Election on

on _____

IS THIS REPORT AN AMENDMENT

☐ YES

☒ NO

5. COVERING PERIOD		FROM 01/01/2011	THROUGH 03/31/2011
SUMMARY	6. CASH ON HAND AT BEGINNING OF THE REPORTING PERIOD	84564.41	
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)	96588.83	
	8. SUBTOTAL (Lines 6 and 7)	181153.24	
	9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	121482.77	
	10. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 9 from 8)	59670.47	
	11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	618.90	
	12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P)	2641988.04	
13. EXPENDITURES SUBJECT TO LIMITATION		0.00	
NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES	14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	989905.00	
	15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2)	1408250.37	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct, and complete.

Type or Print Name of Treasurer

JOHN GROSS

Date

04/13/2011

Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEC FORM 3P are obsolete and should no longer be used.

For further information contact:

Federal Election Commission

999 E Street, N.W.

Washington, DC 20463

Toll Free 800-424-9530

Local 202-694-1100

FEC FORM 3P
(01/2001)

DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS

(PAGE 2, FEC FORM 3P)

Name of committee (in full) RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC		Report Covering the Period From: 01/01/2011 To: 03/31/2011	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	.....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM :			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized	.....	0.00	-600.00
(ii) Unitemized	.....	0.00	10805.00
(iii) Total Contributions	.....	0.00	10205.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	7000.00
(d) The Candidate	.....	75000.00	975000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a) , 17(b), 17(c), 17(d))	.....	75000.00	992205.00
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate	.....	0.00	300000.00
(b) Other Loans	.....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	.....	0.00	300000.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating	.....	21588.83	77561.58
(b) Fundraising	.....	0.00	0.00
(c) Legal and Accounting	.....	0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a), 20(b) and 20(c))	.....	21588.83	77561.58
21. OTHER RECEIPTS (Dividend, Interest, etc.)	.....	0.00	141871.44
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)	.....	96588.83	1511638.02
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES	.....	121482.77	1485811.95
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	.....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	.....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS	.....	0.00	0.00
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate	.....	0.00	0.00
(b) Other Repayments	.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))	.....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees	.....	0.00	2300.00
(b) Political Party Committees	.....	0.00	0.00
(c) Other Political Committees	.....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))	.....	0.00	2300.00
29. OTHER DISBURSEMENTS	.....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	.....	121482.77	1488111.95
III. CONTRIBUTED ITEMS (Stock, Art Objects, etc.)			
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	.....	0.00	

ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A PRESIDENTIAL CANDIDATE 3 / 27
 (Used Only by Primary Committees Receiving or Expecting to Receive Federal Funds)
 (PAGE 3, FEC FORM 3P)
1. NAME OF COMMITTEE (in full)**RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC****ADDRESS (number and street)**C/O JOHN GROSS
11 TIMES SQUARE**CITY, STATE, and ZIP CODE**

NEW YORK

NY

100368299

2. IDENTIFICATION NUMBER

C00430512

ALLOCATION BY STATE

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	0.00	Nebraska	0.00	0.00
Alaska	0.00	0.00	Nevada	0.00	0.00
Arizona	0.00	0.00	New Hampshire	0.00	0.00
Arkansas	0.00	0.00	New Jersey	0.00	0.00
California	0.00	0.00	New Mexico	0.00	0.00
Colorado	0.00	0.00	New York	0.00	0.00
Connecticut	0.00	0.00	North Carolina	0.00	0.00
Delaware	0.00	0.00	North Dakota	0.00	0.00
District of Columbia	0.00	0.00	Ohio	0.00	0.00
Florida	0.00	0.00	Oklahoma	0.00	0.00
Georgia	0.00	0.00	Oregon	0.00	0.00
Hawaii	0.00	0.00	Pennsylvania	0.00	0.00
Idaho	0.00	0.00	Rhode Island	0.00	0.00
Illinois	0.00	0.00	South Carolina	0.00	0.00
Indiana	0.00	0.00	South Dakota	0.00	0.00
Iowa	0.00	0.00	Tennessee	0.00	0.00
Kansas	0.00	0.00	Texas	0.00	0.00
Kentucky	0.00	0.00	Utah	0.00	0.00
Louisiana	0.00	0.00	Vermont	0.00	0.00
Maine	0.00	0.00	Virginia	0.00	0.00
Maryland	0.00	0.00	Washington	0.00	0.00
Massachusetts	0.00	0.00	West Virginia	0.00	0.00
Michigan	0.00	0.00	Wisconsin	0.00	0.00
Minnesota	0.00	0.00	Wyoming	0.00	0.00
Mississippi	0.00	0.00	Puerto Rico	0.00	0.00
Missouri	0.00	0.00	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	0.00

Schedule A-P ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 4 / 27

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input checked="" type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

RUDOLPH GIULIANI

Mailing Address

1251 AVENUE OF THE AMERICAS 49TH FLOOR

City

NEW YORK

State

NY

Zip Code

10020

FEC ID number of contributing
federal political committee.

P00003251

Name of Employer

GIULIANI PARTNERS

Occupation

CHAIRMAN & CEO

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

975000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 1 / 2 0 1 1

Amount of Each Receipt this Period

75000.00

CONTRIBUTION

Transaction ID: SA2

SUBTOTAL of Receipts This Page (optional)

75000.00

TOTAL This Period (last page this line number only)

75000.00

Schedule A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 27

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

PRAXIS LIST RENTAL

Mailing Address

1609 SHOAL CREEK BLVD #203

City

AUSTIN

State

TX

Zip Code

78701

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

109775.32

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 1 1

Amount of Each Receipt this Period

21588.83

LIST RENTAL INCOME

Transaction ID: SA1

SUBTOTAL of Receipts This Page (optional)

21588.83

TOTAL This Period (last page this line number only)

21588.83

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 27

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

RYAN MEDRANO

Mailing Address 5 EAST 22ND ST

City
NEW YORK

State
NY

Zip Code
10010

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB20

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

RYAN MEDRANO

Mailing Address 5 EAST 22ND ST

City
NEW YORK

State
NY

Zip Code
10010

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

RYAN MEDRANO

Mailing Address 5 EAST 22ND ST

City
NEW YORK

State
NY

Zip Code
10010

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB22

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 27

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

AON RISK

Mailing Address 199 WATER STREET

City NEW YORK State NY Zip Code 10038

Purpose of Disbursement
INSURANCE PREMIUM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB13

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

10500.00

B.

Full Name (Last, First, Middle Initial)

BRACEWELL & GIULIANI

Mailing Address 1251 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10020

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB7

Date of Disbursement

01 / 18 / 2011

Amount of Each Disbursement this Period

7541.00

C.

Full Name (Last, First, Middle Initial)

BRACEWELL & GIULIANI

Mailing Address 1251 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10020

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB8

Date of Disbursement

02 / 14 / 2011

Amount of Each Disbursement this Period

7522.31

SUBTOTAL of Disbursements This Page (optional)

25563.31

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 27

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

BRACEWELL & GIULIANI

Mailing Address 1251 AVENUE OF THE AMERICAS

City NEW YORK State NY Zip Code 10020

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB9

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

7511.11

B.

Full Name (Last, First, Middle Initial)

CHASE BANK NA

Mailing Address PO BOX 36520

City LOUISVILLE State KY Zip Code 40233

Purpose of Disbursement
BANK CHARGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB1

Date of Disbursement

01 / 11 / 2011

Amount of Each Disbursement this Period

31.71

C.

Full Name (Last, First, Middle Initial)

CHASE BANK NA

Mailing Address PO BOX 36520

City LOUISVILLE State KY Zip Code 40233

Purpose of Disbursement
BANK CHARGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB2

Date of Disbursement

02 / 09 / 2011

Amount of Each Disbursement this Period

31.63

SUBTOTAL of Disbursements This Page (optional)

7574.45

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 27

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) CHASE BANK NA	Transaction ID: SB3 Date of Disbursement																				
Mailing Address PO BOX 36520	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	1	1												
City LOUISVILLE State KY Zip Code 40233	Amount of Each Disbursement this Period																				
Purpose of Disbursement BANK CHARGE	<table border="1"> <tr> <td>31.83</td> </tr> </table>	31.83																			
31.83																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB10 Date of Disbursement																				
Mailing Address 7704 LEESBURG PKE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	8		2	0	1	1												
City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																				
Purpose of Disbursement DATABASE MANAGEMENT	<table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB11 Date of Disbursement																				
Mailing Address 7704 LEESBURG PKE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	4		2	0	1	1												
City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																				
Purpose of Disbursement DATABASE MANAGEMENT	<table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name	Category/ Type																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

3031.83

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 27

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

CMDI

Mailing Address 7704 LEESBURG PKE

City
FALLS CHURCH

State
VA

Zip Code
22043

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB12

Date of Disbursement

03 / 11 / 2011

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

CONSOLIDATED EDISON CO OF NY

Mailing Address PO BOX 1702

City
NEW YORK

State
NY

Zip Code
10116-1702

Purpose of Disbursement
UTILITIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB18

Date of Disbursement

03 / 28 / 2011

Amount of Each Disbursement this Period

802.18

C.

Full Name (Last, First, Middle Initial)

NEW YORK STATE CORPORATE TAX

Mailing Address PO BOX 1909

City
ALBANY

State
NY

Zip Code
12201

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB15

Date of Disbursement

03 / 08 / 2011

Amount of Each Disbursement this Period

5780.00

SUBTOTAL of Disbursements This Page (optional)

8082.18

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. NEW YORK STATE CORPORATE TAX

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1909

City ALBANY State NY Zip Code 12201

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB16

Date of Disbursement

03 / 08 / 2011

Amount of Each Disbursement this Period

1670.00

B. NYC DEPT OF FINANCE

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5040

City KINGSTON State NY Zip Code 12402

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB17

Date of Disbursement

03 / 08 / 2011

Amount of Each Disbursement this Period

3241.00

C. OPERA NEW MEDIA LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1280 MASSACHUSETTS AVE STE 203

City CAMBRIDGE State MA Zip Code 02138

Purpose of Disbursement
WEB SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB19

Date of Disbursement

03 / 31 / 2011

Amount of Each Disbursement this Period

20000.00

SUBTOTAL of Disbursements This Page (optional)

24911.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

UNITED STATES TREASURY

Mailing Address DEPT OF THE TREASURY
INTERNAL REVENUE SVC CENTER

City OGDEN State UT Zip Code 84201

Purpose of Disbursement
TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB14

Date of Disbursement

03 / 13 / 2011

Amount of Each Disbursement this Period

36911.00

B.

Full Name (Last, First, Middle Initial)

WACHOVIA BANK

Mailing Address PO BOX 563966

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB4

Date of Disbursement

01 / 03 / 2011

Amount of Each Disbursement this Period

253.00

C.

Full Name (Last, First, Middle Initial)

WACHOVIA BANK

Mailing Address PO BOX 563966

City CHARLOTTE State NC Zip Code 28262

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB5

Date of Disbursement

02 / 01 / 2011

Amount of Each Disbursement this Period

78.00

SUBTOTAL of Disbursements This Page (optional)

37242.00

TOTAL This Period (last page this line number only)

Schedule B-P

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A.

Full Name (Last, First, Middle Initial)

WACHOVIA BANK

Mailing Address PO BOX 563966

City

CHARLOTTE

State

NC

Zip Code

28262

Purpose of Disbursement

CREDIT CARD MERCHANT FEE

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: SB6

Date of Disbursement

/ /

Amount of Each Disbursement this Period

78.00

SUBTOTAL of Disbursements This Page (optional)

78.00

TOTAL This Period (last page this line number only)

121482.77

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

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LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Transaction ID: SC-1

LOAN SOURCE Full Name (Last, First, Middle Initial)
RUDOLPH W. GIULIANI-LOAN FROM PERSONAL FU -
[PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼Mailing Address 1251 AVENUE OF THE AMERICAS
49TH FLOOR

City NEW YORK State NY ZIP Code 10020

Original Amount of Loan

500000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 4D D
0 9Y Y Y Y
2 0 0 8

12/31/2011

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

500000.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 15 / 27

LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Transaction ID: SC-2

LOAN SOURCE Full Name (Last, First, Middle Initial)
RUDOLPH W. GIULIANI-LOAN FROM PERSONAL FU -
[PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼Mailing Address 1251 AVENUE OF THE AMERICAS
49TH FLOOR

City NEW YORK State NY ZIP Code 10020

Original Amount of Loan

300000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

300000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 5D D
3 0Y Y Y Y
2 0 0 8

12/31/2011

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

300000.00

TOTALS This Period (last page in this line only) ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule C-PUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 16 / 27

LOANSFOR LINE NUMBER:
(check only one)☒ 19a
☐ 19b

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

Transaction ID: SC-3

LOAN SOURCE Full Name (Last, First, Middle Initial)
RUDOLPH W. GIULIANI-LOAN FROM PERSONAL FU -
[PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼Mailing Address 1251 AVENUE OF THE AMERICAS
49TH FLOOR

City NEW YORK State NY ZIP Code 10020

Original Amount of Loan

300000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

300000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 2D D
1 0Y Y Y Y
2 0 0 8

12/31/2011

0.0000

% (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional) ▶

300000.00

TOTALS This Period (last page in this line only) ▶

1100000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☒ 11
☐ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MCCLATCHY NEWSPAPERSNature of Debt (Purpose):
PRESS TRAVEL

Mailing Address 700 12TH ST STE 1000

City State ZIP Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

334.81

Transaction ID: SD11-2

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

334.81

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NEW YORK TIMESNature of Debt (Purpose):
PRESS TRAVEL

Mailing Address 1416 DITMAS AVE

City State ZIP Code
BROOKLYN NY 11226

Outstanding Balance Beginning This Period

194.83

Transaction ID: SD11-4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

194.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
WTKK-FM BOSTONNature of Debt (Purpose):
PRESS TRAVEL

Mailing Address 55 MORRISSEY BLVD

City State ZIP Code
BOSTON MA 02125

Outstanding Balance Beginning This Period

89.26

Transaction ID: SD11-1

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

89.26

1) **SUBTOTALS** This Period This Page (optional).....

618.90

2) **TOTALS** This Period (last page this line number only).....

618.90

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

618.90

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 18 / 27

FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
ACT TELECONFERENCING SERVICES INCNature of Debt (Purpose):
UTILITIES

Mailing Address DEPT CH 17366

City State ZIP Code
PALATINE IL 60055

Outstanding Balance Beginning This Period

14468.99

Transaction ID: SD-3

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14468.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T MOBILITY LLCNature of Debt (Purpose):
TELEPHONE SERVICE

Mailing Address PO BOX 8405

City State ZIP Code
PHOENIX AZ 85062

Outstanding Balance Beginning This Period

106691.17

Transaction ID: SD-4

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106691.17

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
BANDWIDTH.COMNature of Debt (Purpose):
UTILITIES

Mailing Address 4001 WESTON PKWY STE 100

City State ZIP Code
CARY NC 27513

Outstanding Balance Beginning This Period

9133.50

Transaction ID: SD-6

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9133.50

1) **SUBTOTALS** This Period This Page (optional).....

130293.66

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
BRABENDERCoxNature of Debt (Purpose):
MEDIA

Mailing Address 100 W STATION SQUARE DR STE 315

City	State	ZIP Code
PITTSBURGH	PA	15219

Outstanding Balance Beginning This Period

69135.83

Transaction ID: SD-7

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

69135.83

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CHRIS MOTTOLA CONSULTINGNature of Debt (Purpose):
MEDIA

Mailing Address 1382 LAFAYETTE ST

City	State	ZIP Code
CAPE MAY	NJ	08204

Outstanding Balance Beginning This Period

41890.64

Transaction ID: SD-9

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

41890.64

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CITATION SHARESNature of Debt (Purpose):
TRAVEL

Mailing Address FIVE AMERICAN LN

City	State	ZIP Code
GREENWICH	CT	06831

Outstanding Balance Beginning This Period

10967.85

Transaction ID: SD-10

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10967.85

1) **SUBTOTALS** This Period This Page (optional).....

121994.32

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 CONSOLIDATED EDISON CO OF NY

 Nature of Debt (Purpose):
 UTILITIES

Mailing Address PO BOX 1702

City	State	ZIP Code
NEW YORK	NY	10116

Outstanding Balance Beginning This Period

802.18

Transaction ID: SD-14

Amount Incurred This Period

0.00

Payment This Period

802.18

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 DELTA AIRELITE

 Nature of Debt (Purpose):
 TRAVEL

Mailing Address 77 COMAIR BLVD

City	State	ZIP Code
ERLANGER	KY	41018

Outstanding Balance Beginning This Period

15021.48

Transaction ID: SD-15

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15021.48

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 GIULIANI PARTNERS

 Nature of Debt (Purpose):
 RENT

Mailing Address 5 TIMES SQUARE

City	State	ZIP Code
NEW YORK	NY	10036

Outstanding Balance Beginning This Period

59290.20

Transaction ID: SD-16

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

59290.20

1) **SUBTOTALS** This Period This Page (optional).....

74311.68

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
GIULIANI SECURITY & SAFETY LLCNature of Debt (Purpose):
SECURITY SERVICE

Mailing Address 5 TIMES SQUARE

City State ZIP Code
NEW YORK NY 10036

Outstanding Balance Beginning This Period

141643.70

Transaction ID: SD-17

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

141643.70

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
GORDON C JAMES PUBLIC RELATIONSNature of Debt (Purpose):
TRAVEL

Mailing Address 4715 N 32ND ST STE 104

City State ZIP Code
PHOENIX AZ 85018

Outstanding Balance Beginning This Period

5064.19

Transaction ID: SD-18

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5064.19

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JON KRAUSHAR & ASSOCIATES INCNature of Debt (Purpose):
POLITICAL STRATEGY CONSULTING

Mailing Address 10 E 40TH ST STE 1308

City State ZIP Code
NEW YORK NY 10016

Outstanding Balance Beginning This Period

72119.25

Transaction ID: SD-21

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

72119.25

1) **SUBTOTALS** This Period This Page (optional).....

218827.14

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
LYRIS TECHNOLOGIES INCNature of Debt (Purpose):
WEB SERVICE

Mailing Address PO BOX 49023

City State ZIP Code
SAN JOSE CA 95161

Outstanding Balance Beginning This Period

5400.00

Transaction ID: SD-23

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5400.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MCGRAW COMMUNICATIONS INCNature of Debt (Purpose):
UTILITIES

Mailing Address PO BOX 36204

City State ZIP Code
NEWARK NJ 07188

Outstanding Balance Beginning This Period

27920.55

Transaction ID: SD-25

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

27920.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
OPERA NEW MEDIA LLCNature of Debt (Purpose):
WEB SERVICE

Mailing Address 1280 MASSACHUSETTS AVE STE 203

City State ZIP Code
CAMBRIDGE MA 02138

Outstanding Balance Beginning This Period

150000.00

Transaction ID: SD-28

Amount Incurred This Period

0.00

Payment This Period

20000.00

Outstanding Balance at Close of This Period

130000.00

1) **SUBTOTALS** This Period This Page (optional).....

163320.55

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 PRESS ASSOCIATION INC

 Nature of Debt (Purpose):
 SUBSCRIPTIONS

Mailing Address PO BOX 414243

City	State	ZIP Code
BOSTON	MA	02241

Outstanding Balance Beginning This Period

15170.40

Transaction ID: SD-29

Amount Incurred This Period

-15170.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 ROMAN TECH LLC

 Nature of Debt (Purpose):
 COMPUTER SUPPORT

Mailing Address 8645 24TH AVE

City	State	ZIP Code
BROOKLYN	NY	11214

Outstanding Balance Beginning This Period

13500.00

Transaction ID: SD-31

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 SCOTT HOWELL & COMPANY

 Nature of Debt (Purpose):
 MEDIA

Mailing Address 208 N MARKET ST STE 225

City	State	ZIP Code
DALLAS	TX	75202

Outstanding Balance Beginning This Period

162884.24

Transaction ID: SD-32

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

162884.24

1) **SUBTOTALS** This Period This Page (optional).....

176384.24

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

A. Form/Schedule : **SD12**
Transaction ID : **SD-29**

THE NEGATIVE AMOUNT INCURRED IN PERIOD REFLECTS THE CORRECTION OF AN ERRONEOUS INVO
DID NOT PROVIDE AND THE COMMITTEE DID NOT RECEIVE SERVICES FROM THE VENDOR FOR WHICH
WAS BILLED.

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SPROUSE CONSULTINGNature of Debt (Purpose):
POLITICAL STRATEGY CONSUL-
TING

Mailing Address PO BOX 8635

City	State	ZIP Code
CHARLESTON	WV	25303

Outstanding Balance Beginning This Period

7200.00

Transaction ID: SD-34

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TARRANCE GROUP INCNature of Debt (Purpose):
TRAVEL

Mailing Address 201 N UNION ST STE 410

City	State	ZIP Code
ALEXANDRIA	VA	22314

Outstanding Balance Beginning This Period

36170.19

Transaction ID: SD-36

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

36170.19

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
TAUGHANNOCK AVIATION CORPNature of Debt (Purpose):
TRAVELMailing Address TOMPKINS COUNTY AIRPORT
66 BROWN RD

City	State	ZIP Code
ITHACA	NY	14850

Outstanding Balance Beginning This Period

210307.00

Transaction ID: SD-37

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

210307.00

1) **SUBTOTALS** This Period This Page (optional).....

253677.19

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
UPSTREAM COMMUNICATIONSNature of Debt (Purpose):
WEB SERVICE

Mailing Address 1609 SHOAL CREEK BLVD # 203

City State ZIP Code
AUSTIN TX 78701

Outstanding Balance Beginning This Period

10900.00

Transaction ID: SD-39

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

10900.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VERIZON WIRELESSNature of Debt (Purpose):
TELEPHONE SERVICE

Mailing Address PO BOX 408

City State ZIP Code
NEWARK NJ 07101

Outstanding Balance Beginning This Period

236045.23

Transaction ID: SD-40

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

236045.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
VORNADO OFFICE MGMT LLCNature of Debt (Purpose):
RENT/UTILITIES

Mailing Address 40 FULTON ST

City State ZIP Code
NEW YORK NY 10038

Outstanding Balance Beginning This Period

106462.82

Transaction ID: SD-41

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

106462.82

1) **SUBTOTALS** This Period This Page (optional).....

353408.05

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

Schedule D-P**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 27 / 27

FOR LINE NUMBER:
(check only one)
☐ 11
☒ 12

NAME OF COMMITTEE (In Full)

RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 WEST MERIDIAN LLC

 Nature of Debt (Purpose):
 MESSAGE PHONE CALLS

Mailing Address 914 164TH ST SE # 343

City	State	ZIP Code
MILL CREEK	WA	98012

Outstanding Balance Beginning This Period

38631.56

Transaction ID: SD-42

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

38631.56

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
 XO COMMUNICATIONS LLC

 Nature of Debt (Purpose):
 TELEPHONE SERVICE

Mailing Address 14239 COLLECTIONS CENTER DR

City	State	ZIP Code
CHICAGO	IL	60693

Outstanding Balance Beginning This Period

11139.65

Transaction ID: SD-43

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11139.65

1) **SUBTOTALS** This Period This Page (optional).....

49771.21

2) **TOTALS** This Period (last page this line number only).....

1541988.04

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

1100000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

2641988.04